

STATE OF MICHIGAN DEPARTMENT OF EDUCATION LANSING

RICK SNYDER GOVERNOR MICHAEL P. FLANAGAN STATE SUPERINTENDENT

FISCAL YEAR 2014 CHILD AND ADULT CARE FOOD PROGRAM OPERATIONAL MEMORANDUM #19

TO: Child and Adult Care Food Program Institutions

FROM: Marla J. Moss, Director

Office of School Support Services

DATE: July 14, 2014

SUBJECT: New Application and Budget Workshop Dates for Fiscal Year (FY) 2015

Application – Sponsors of Centers

ACTION: On-Line Registration for Application and Budget Worksheet Workshops for

CACFP Sponsors of Centers for Fiscal Year 2015 Application

The new workshop training dates have been scheduled for sponsors of centers of the Child and Adult Care Food Program (CACFP). Based upon guidance from the United States Department of Agriculture (USDA), *all* sponsors of centers participating in CACFP will be required to submit or update budget information to demonstrate financial viability with their initial application per 7CFR 226.6(f)(1)(iv) and 226.6(f)(3)(iv)(A). Sponsors of centers are public or non-profit private organizations with more than one site. Sponsors of centers were required to submit the budget worksheet beginning in FY 2014 and update budgetary information as needed thereafter.

The current budget worksheet for sponsors of centers for FY 2015 can be found under the financial resources section of the CACFP website: www.michigan.gov/cacfp. The workshops are designed to provide in-person assistance while participants work on their applications and budget worksheets. CACFP staff will be available to answer specific questions. In order for the workshop to be beneficial, there is a list of required documents that participants will need to bring. This list can be found on the on-line registration form. Instructions to register on-line for the sponsors of centers are attached below. Registration is required, as seating is limited.

Certificates will be available upon completion of the training and can be used toward the annual training required by the Department of Human Services (DHS). Questions regarding these trainings may be directed to the CACFP staff at 517-373-7391.

Persons with disabilities needing reasonable accommodations for effective participation in the workshop should contact the Child and Adult Care Food Program office at (517) 373-7391. Requests for accommodations should be made at least two weeks prior to training sessions.

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Child and Adult Care Food Program Fiscal Year 2015 Budget Registration On-Line Registration Instructions

To register:

- 1. Go to the Workshop registration at: https://mdoe.state.mi.us/fs registration/
- 2. Click on Register For A Workshop. Space is limited, so please register early. There is a capacity limit for the Budget Workshop. Due to the limited space, it is requested that only one person from each institution attend a specific workshop to better serve the CACFP participants.
- 3. Next, click on the "I'm registering from an Organization" box.
- 4. For the Budget Workshop you may only choose the workshop appropriate for your type of institution. Click on the down arrow and choose a workshop: 2015 CACFP Independent Center Budget Workshop (Single Feeding Site) or 2015 Sponsor CACFP Budget Workshop (Multiple Feeding Sites) after choosing the appropriate workshop, then click **Next**.
- 5. In the Organization Name textbox, type the Organization Name. Then click **Next**.
- 6. Fill in **all** of the required registration information:
 - a. First Name and Last Name
 - b. Title
 - c. E-Mail Address
 - d. Phone Number
 - e. Michigan Department of Education (MDE) Agreement Number or check the box indicating in the process of applying
 - f. Name of the Institution
 - g. County
- 7. Click on the box next to the date with the location information for the desired training date/location you wish to attend. And then click **Next**.
- 8. Review your budget registration form to make sure you have filled in all of the required information. If complete, then click **Submit Registration**.
- 9. If information is incorrect, click *Change* to make the necessary changes. If the information is correct, click *Confirm* to complete the registration process. Once you have received your confirmation, you can print this information for your records.

Your registration is NOT complete until you click Confirm. **PLEASE NOTE:** You will need to repeat this process for EACH person registering for the workshop.

The workshop will be participant-focused so you should bring a laptop or tablet to work on financial documentation (i.e., payroll, administrative and food service labor cost), sample month of receipts for food and non-food and/or general ledger (i.e., QuickBooks), annual documentation for your sources of income (DHS payments, grants, tuition, etc.), or a flash drive with this information and any other paperwork you may need to complete the budget for your institution. You must have all user IDs and passwords for the MEGS+ system. The individual attending the workshop should have Level 2 or higher security access in the MEGS+ system.

Persons with disabilities needing reasonable accommodations for effective participation in the workshop should contact the Child and Adult Care Food Program office at 517-373-7391. Requests for accommodations should be made at least two weeks prior to training sessions.

If you have any questions regarding this on-line registration process, please contact the Child and Adult Care Food Program office via email to the registration coordinator, Katherine Foreman, at: foremank4@michigan.gov or by phone at (517) 373-7391. We look forward to seeing you at one of the workshops.

Child and Adult Care Food Program Fiscal Year 2015 Application Registration On-Line Registration Instructions

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- 3. Click on the "I'm Registering From An Organization" box.
- 4. Click the down arrow to choose workshop. Click on the "2015 CACFP Application Workshop", and then click **Next**.
- 5. In the Organization Name textbox, type the Organization Name. Then click **Next**.
- 6. Fill in **all** of the required registration information:
 - a. First Name and Last Name
 - b. Title
 - c. E-Mail Address
 - d. Phone Number
 - e. Michigan Department of Education (MDE) Agreement Number or check the box indicating in the process of applying
 - f. Name of the Institution
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